

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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STATE OF HAWAL STATE ETHICS COMM.SSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
Piltz	Karen	M.L.	528-8200
MAILING ADDRESS (Street)			FAX
745 Fort Street, 9th Floor			536-5869
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Chun Kerr Dodd Beaman			528-8200
MAILING ADDRESS (Street)			FAX
745 Fort Street, 9 th Floor			536-5869
(City)	(State)	(Zip	Code)
Honolulu	Hawaii	9681	3

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LO	TELEPHONE	
Idaho Waste Systems, Inc.	208-796-2727	
MAILING ADDRESS (Street)		FAX
P.O. Box 1386		208-796-2729
(City)	(State)	(Zip Code)
Mountain Home	ID	83647
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		ES STATEMENT TELEPHONE
Renee Ruscoe		917-226-4151
MAILING ADDRESS (Street)		FAX
10800 SE 17 th Circle, G-84		503-296-5461
(City)	(State)	(Zip Code)
Vancouver	WA	98664

PART III DESCRIPTION	OF SUBJECTS UPON WHICI	H YOU EXPECT TO LOBBY		
			N 1 Circuit T 1 1 1	
[] Agriculture	[] Education	[] Human Services	[X] Science, Technology & Economic Development	
[X] Communications & Public Utilities	[X] Government Operations & Finance	[X] Intergovernmental Relations, International Affairs	[] Tourism & Recreation	
[X] Consumer Protection & Commerce	[X] Hawaiian Affairs	[] Labor & Employment	[X] Transportation	
[] Culture, Arts, Historic Preservation	[] Health	[X] Planning, Land & Water Use Management	[] Other: (indicate below)	
[X] Ecology, Energy Environmental Protection	[] Housing	[] Public Safety & Corrections		
	N OF LOBBYIST			
I hereby certify that the	information furnished above is	s, to the best of my knowledge, o	correct and complete.	
An Dast.		1/2510	1 6	
James 7 3	(Signature of Lobbyist) (Date)			
	(o.g. all o c. acceptor)	(-	24.0)	
PART V AUTHORIZATIO	N TO LOBBY			
NAME		TITLE OF AUTHORIZING OFFICER	OR PERSON REPRESENTED	
Grant Gauthier		Vice Breeident Business Davidson		
Grant Gauthier		Vice President Business Developmen)T	
NAME OF ORGANIZATION (if app	blicable)	TEL	EPHONE	
,				
Idaho Waste Systems, Inc		208	-796-2727	
MAILING ADDRESS (Street)	FAX			
P.O. Box 1386		208	-796-2729	
(City)	(State) (Zip Code)			
Mountain Home	ID 83647			
I bereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.				
61H-1-11.				
1 Haban	auth	1/25/2	1005	
(Signature of Au	thorizing Officer or Person Represer	nted) (I	Date)	